STATE OF SOUTH DAKOTA

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

Statement of Legal Newspaper Ownership and Circulationec. OF STATE

1. TITLE OF NEWSPAPER	e Bonestall	Enterpris	2. DA	TE 9/30/10	
3. FREQUENCY OF ISSUE WIEKLU	3A. NO. OF ISSUES PUBLI	SHED ANNUALLY	3B. ANNUAL S	28.29	
4. COMPLETE MAILING ADDR	ESS OF KNOWN OFFICE O	OF PUBLICATION (Stre	eet, City, County, S	State and ZIP+4 Code)	
(Not printers) Hail Mallatto St. Brongston Commence (a. 4) 57317-0170					
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE					
HOI Meshattest. Bonestyel, Opagory (050 57311-0170					
6. FULL NAME OF PUBLISHER: 5 COTT Q. Perlan Fei N					
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.					
FULL NAME COMPLETE MAILING ADDRESS					
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I					
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so					
state. If more space is needed, lis					
Money					
9. EXTENT AND NATURE OF C	CIRCULATION	AVERAGE NO. CO EACH ISSUED PRECEDI MONTHS	NC 12	CTUAL NO. COPIES ISSUED REST TO FILING DATE	
A. TOTAL NO. COPIES (Net Press Run)		460		460	
B.PAID AND/OR REQUESTED CIRCULATION					
Sales through dealers and carriers, street vendors and		73		75	
counter sales. 2. Mail Subscription		2-0		221	
(Paid and or requested)		320		771	
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)		401		406	
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS		13		13	
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES				_	
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		414		419	
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing		46		41	
2. Return from News Agents		-			
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)		460		460	
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public					
I swear that the statements	s made by me are true,	correct, and comp	lete:		
List & herbulation		Publish			
(Signature)			(Title)	∕ :	
State of South Dakota)	Sworn to before me	this 30 day of	719t , 20/10	
County of blegory)		-U WHIE!	Notary Public		
(Seal)		My commission exp	My commission expires: 4 MM 3, 3011		

Form: SOS REC 051 7/2004